

Under the Paperwork reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/569,475
(Use as many sheets as necessary)				Filing Date	02-24-06
				First Named Inventor	Haruyuki Makio
				Art Unit	1796
				Examiner Name	I. ZEMEL
Sheet	1	of	2	Attorney Docket Number	1155-0293PUS1

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not Considered. Include of this form with next communication to applicant.

1. Applicant's unique citation designation number (optional) 2. See Kinds codes of USPTO patent Documents, at www.uspto.gov or MPEP 901.04. Considered, include on this form with next communication to applicant.

2. Enter Office that issued the document, by the two letter code (WIPO Standard ST 3.1.4). For Japanese patent documents, the indication of the year of the reign of the

3. Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4. For Japanese patent documents, the indication of the year of the right of the Emperor must precede the serial number of the patent document. 5. Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.6

16 if possible. 6. Applicant is to place a check mark here if English language Translation is attached.
This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require

to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, DOL, Washington, DC 20416-1152. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

P.O. Box 1450 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.
SEND FEES, COMPLETED FORMS TO: P.O. Box 1450, Alexandria, VA 22313-1450.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
If you need assistance in completing the form, call 1-800-742-1947.

If you need assistance in completing the form, call 1-800-PIO-9199 (1-800-786.9199) and select option 2.

CHW

Under the Paperwork reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<p>Substitute for form 1449B/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p><i>(Use as many sheets as necessary)</i></p>				<p>Complete if Known</p>	
<p>Sheet</p>		<p>2</p>	<p>of</p>	<p>2</p>	<p>Attorney Docket Number</p>
<p>Application Number</p>		<p>10/569,475</p>			
<p>Filing Date</p>		<p>02-24-06</p>			
<p>First Named Inventor</p>		<p>Haruyuki Makio</p>			
<p>Group Art Unit</p>		<p>1796</p>			
<p>Examiner Name</p>		<p>I. ZEMEL</p>			

NON PATENT LITERATURE DOCUMENTS

Examiner initial *	Cite No. 1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T 2
	7	Office Action in related Japan Application No. 2004-247319 mailed July 6, 2010.	<input type="checkbox"/>
			<input type="checkbox"/>

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1. Applicants unique citation designation number. (optional) 2. Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

47